

UTILITY	Attorney Docket No.		
PATENT APPLICATION	First Inventor or App		
TRANSMITTAL	Title	Urushiol	

or or Application Identifier

William M. Yarbrough

Urushiol Induced Contact Dermatitis Treatment (Only for new nonprovisional applications under 37 C.F.R. § 1.53(b)) Express Mail Label No.

	APPLICATION ELEMENTS	Assistant Commission Co.				
See MPEP d	hapter 600 concerning utility patent application contents.	Assistant Commissioner for Patent ADDRESS TO: Box Patent Application Washington, DC 20231				
1. X (S	Fee Transmittal Form (e.g., PTO/SB/17) Submit an original and a duplicate for fee processing)	6. Microfiche Computer Program (Appendix)				
2. X S	pecification [Total Pages 1.4]	7. Nucleotide and/or Amino Acid Sequence Submission				
	Descriptive title of the Invention	(if applicable, all necessary) a. Computer Readable Copy				
	Pross References to Related Applications					
-3	Statement Regarding Fed sponsored R & D	b. Paper Copy (identical to computer copy)				
	Reference to Microfiche Appendix	c. Statement verifying identity of above copies				
	Background of the Invention	ACCOMPANYING APPLICATION PARTS				
	Brief Summary of the Invention					
	Brief Description of the Drawings (if filed)	X statement sports (cover sheet a document(s))				
	Detailed Description Claim(s)	9. 37 C.F.R.§3.73(b) Statement (when there is an assignee)				
	Abstract of the Disclosure	10. English Translation Document (if applicable)				
	awing(s) (35 U.S.C. 113) [Total Sheets]	Information Disclosure Copies of IDS				
	Statement (IDS)/PTO-1449 Citations					
	Declaration [Total Pages 3]	12 Preliminary Amendment				
a. [Newly executed (original or copy)	13. × Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
b	0. Small Entity					
	[Note Box 5 below!	14. X Statement(s) Statement filed in prior application,				
+	i. DELETION OF INVENTOR(S) Signed statement attached deleting					
	inventor(s) named in the prior application	(if foreign priority is claimed)				
e 🖂	500 37 C.F.R. 66 1 63(d)(2) and 1 33/h). 16. Other				
The	rporation By Reference (useable if Box 4b is checked) entire disclosure of the prior application, from whic					
сору	of the eath or declaration is supplied under Boy 4	h ie PNOTE FOR ITEMS 1 & 14 TH ORDER TO BE ENTITIED TO BAY SWALL TO				
CORS	idered to be part of the disclosure of the accompanies	IVING FEES, A SMALL ENTITY STATEMENT IS REQUIRED GT CFR 1271 EXCEPT				
17. If a CO	cation and is hereby incorporated by reference the					
□ ∞	ontinuation Divisional Continuation-in-par	I supply the requisite information below and in a preliminary amendment				
Prior an	aplication information: Examiner					
	18. CORRESPON	Group / Art Unit:				
	id. CORRESPON	JENCE AUDRESS				
Custom	er Number or Bar Code Label	Of Correspondence address below				
	(Insert Customer No. or A	litach har code lehel here):*				
Name	Robert L. Knechtel					
	KNECHTEL, DEMEUR & SAMLAN					
Address	30 South Wacker Drive					
	Suite 2810					
City	Chicago State	IL Zip Code 60606				
Country	U.S. Telephone	312/655-9900 Fax 312/655-1917				
Name (Pr	Robert L. Roechtel	Registration No. (Attorney/Agent) 36,845				
Signature		Pate 7/2 /00				
Burden Hour St	inden Hour Statement. This form is estimated to take 0.2 hours to complete.					
Washington, DC	le amount of time you are required to complete this form 20231. DO NOT SEND FEES OR COMPLETED FORMS (Ication, Washington, DC 20231.	should be sent to the Chief Information Officer, Patent and Trademark Office, TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents.				

Friedman 6-31

Box Patent Application, Washington, DC 20231.

Express Mail Number: EE762591868US

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Approved for use through 9:50/2000. CMB 0851-0032

Patent and Trademark Cffee: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid CMB control number.

Patent fees are subject to annual revision on October 1. These are the fees affective October 1, 1997.

Small Entity payments must be supported by a small entity statement, otherwise large entity bes must be poid. See Forms PTO/SB/09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT

(\$) 556.00

Complete if Known			
Application Number			
Filing Date	Herewith		
First Named Inventor	William M. Yarbrough		
Examiner Name			
Group / Art Unit			
Attorney Docket No.			
		-	

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit	3. ADDITIONAL FEES Large Entity Small Entity Fee Fee Fee Fee Code (5) Code (5) Fee Description	Fee Paid		
Account 061-201	105 130 205 85 Surcharge - late filing fee or cath			
Ceposit Account Name	127 50 227 25 Surcharge - late provisional filing fee or cover sheet.			
Charge Any Additional Fee Required Under 57 C.F.R. § 1.18 at the Mailing	139 130 139 130 Non-English specification			
37 C.F.R. S§ 1.18 and 1.17 of the Notice of Allowance	147 2,520 147 2,520 For filling a request for reexamination 112 920° 112 920° Requesting publication of SIR prior to			
2. Payment Enclosed: Check Money Cther	Examiner action 113 1,840° 113 1,840° Requesting publication of SIR after			
	Examiner action 115 110 215 55 Extension for reply within first month			
FEE CALCULATION	118 400 218 200 Extension for reply within second month			
1. Basic filing fee	117 950 217 475 Extension for reply within third month			
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid	118 1,510 218 755 Extension for reply within fourth month			
Code (\$) Code (\$)	128 2,060 228 1,030 Extension for reply within fifth month			
101 790 201 395 Utility filling fee 380	119 310 219 155 Notice of Appeal			
108 330 208 165 Design filing fee	120 310 220 155 Filing a brief in support of an appeal			
107 540 207 270 Plant filing fee	121 270 221 135 Request for oral hearing			
108 790 208 395 Reissue filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding			
114 150 214 75 Provisional filing fee	140 110 240 55 Petition to revive - unavoidable			
SUBTOTAL (1) (\$) 380.00	141 1,320 241 660 Petition to revive - unintentional			
2. EXTRA CLAIM FEES	142 1,320 242 660 Utility issue fee (or reissue)			
Extra Claims below Fee Paid	143 450 243 225 Design issue fee			
Total Claims 22 -20** = 2 X 9 = 18	144 670 244 335 Plant issue fee			
Ctaims	122 130 122 130. Petitions to the Commissioner			
Multiple Dependent 130 = 1	123 50 123 50 Petitions related to provisional applications			
**or number previously paid, if greater, For Reissues, see below Large Entity Small Entity	128 240 128 240 Submission of Information Disclosure Stmt			
Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)	80		
103 22 203 11 Claims in excess of 20	146 790 248 395 Filing a submission after final rejection			
102 82 202 41 Independent claims in excess of 3	(37 CFR 1.129(a)) 149 790 249 395 For each additional invention to be			
104 270 204 135 Multiple dependent claim, if not paid	examined (37 CFR 1.129(b))			
109 82 209 41 ** Reissue independent claims over original patent	Other fee (specify)			
110 22 210 11 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)			
SUBTOTAL (2) (\$) 96 Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 80'				
SUBMITTED BY	Complete (# english			

SUBMITTED BY			Complete (if applicable)				
Typed or Printed Name	Robert L. Knechtel			Reg. Number	36,845		
Signature	MX	A		Data	7/3/99	Deposit Account User ID	

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CERTIFICATE OF EXPRESS MAIL

I hereby certify that on July 3, 1999, I, Robert L. Knechtel, mailed via the United States Postal Service Express Mail, Express Mail Label Number EE762591868US, the following documents for filing with the Commissioner of Patents:

DATE: 7/3/99

Robert L. Knechtel

Registration Number 36,845